

SEP 30 2004

001/063



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**FAX**

<b>To</b>	Examiner Thomas C. McKenzie
<b>Company</b>	USPTO
<b>FAX</b>	(703) 872-9306
<b>From</b>	Karen E. Brown
<b>Date</b>	September 30, 2004
<b>Subject</b>	Application No. 10/035,823 Attorney Docket No. VPI/99-01 CON US
<b>Total Pages</b>	63

**Message or Comment**

In response to the Office Action dated March 30, 2004, attached is a Response to Office Action relating to the above-identified application.

**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that this correspondence, and any documents referred to as attached hereto, is/are being transmitted to the United States Patent and Trademark Office, Facsimile Number: (703) 872-9306 on this 30th day of September 2004.

Karen E. Brown  
Karen E. Brown

If any problems occur with this fax transmittal, please call (617) 444-6536 immediately.

**FAX Number (617) 444-6483 Legal Department**

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SEP 30 2004

VPI/99-01 CON US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner : Thomas C. McKenzie, Ph.D.  
Group Art Unit : 1624 Confirmation No.: 1783  
Inventors : Francesco G. Salituro et al.  
Application No.: 10/035,823  
Filed : October 23, 2001  
Title : INHIBITORS OF c-JUN N-TERMINAL KINASES  
(JNK)

Cambridge, Massachusetts  
September 30, 2004

COMMISSIONER FOR PATENTS  
P.O. BOX 1450  
ALEXANDRIA, VA 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☒ a Reply to Office Action; ☒ a Petition for Extension of Time; ☐ a substitute Specification; ☐ a Declaration; ☐ a Supplemental Declaration; ☐ a Power of Attorney; ☐ an Associate Power of Attorney; ☐ formal drawings; to be filed in the above-identified patent application.

FEE FOR ADDITIONAL CLAIMS

☒ A fee for additional claims is not required.

☐ A fee for additional claims is required.

The additional fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	26	- 26	* =	X \$ 18 =	\$ 0
INDEPENDENT CLAIMS	2	- 3	** =	X \$ 84 =	\$ 0
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM				+ \$280 =	\$

\* If less than 20, insert 20.

TOTAL \$ 0

\*\* If less than 3, insert 3.

[ ] A check in the amount of \$\_\_\_\_\_ in payment of the filing fee is transmitted herewith.

[X] The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 50-0725. A duplicate copy of this transmittal letter is transmitted herewith.

[ ] Please charge \$\_\_\_\_\_ to Deposit Account No. 50-0725 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

#### EXTENSION FEE

[X] The following extension is applicable to the Response filed herewith; [ ] \$110.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); [ ] \$420.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); [X] \$950.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); [ ] \$1,480.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.136(a); \$2,010.00 within fifth month pursuant to 37 C.F.R. § 1.136(a).

- ☐ A check in the amount of ☐ \$110.00; ☐ \$420.00;  
☐ \$950.00; ☐ \$1,480.00; ☐ \$2,010.00 in payment of the  
extension fee is transmitted herewith.
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Karen E. Brown

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